

Compliance Evaluation and Concept Form**Attachment C**

The Home and Community-Based Services (HCBS) rules ensure that people with disabilities have full access to, and enjoy the benefits of, community living through long-term services and supports in the most integrated settings of their choosing. In order to assist in determining eligibility for compliance funding, providers must complete this evaluation. Both "Yes" and "No" answers require an explanation. A "No" response *could* mean a service setting is out of compliance with the HCBS rules and is potentially eligible for funding to make necessary adjustments. Once this evaluation is completed, it should act as a guide for filling out the provider compliance funding concept, which is required for any provider to be eligible for compliance funding. **Completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules. Only providers requesting compliance funding need to complete this evaluation.**

Federal Requirements #1-5 apply to providers of all services, including residential and non-residential settings. Federal Requirements #6-10 are additional requirements that apply only to provider-owned or controlled residential settings.

The column labeled "Guidance" contains a series of questions intended to help identify compliance or non-compliance with each requirement as it relates to the HCBS rules. While responses to these questions can help in the determination of whether or not a particular requirement is met, these responses may not be the sole factor in this determination.

More information on the HCBS rules and this form can be found at www.dds.ca.gov/HCBS.

Questions may be directed to HCBSregs@dds.ca.gov.

Date(s) of Evaluation: November 21, 2019	Completed by: Doris Woodruff
Vendor Name, Address, Contact: DDAC Co LLC dba Saint Andrews Manor (SAM) and Saint Charles Manor (SCM); SAM - 36 St. Andrews Road Valley Springs, CA 95252; SCM - 3316 St. Ann Way, Modesto, CA 95355; Contact: Doris Woodruff, cell phone (209) 483-8725	
Vendor Number: HV0379 (SAM); HV0216 (SCM)	
Service Type and Code: Adult Residential Facility SAM -113; SCM-915	
Federal Requirement #1: <i>The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</i>	Guidance: <ul style="list-style-type: none">• Do individuals receive services in the community based on their needs, preferences and abilities?• Does the individual participate in outings and activities in the community as part of his or her plan for services?• If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource?• Do individuals have the option to

control their personal resources, as appropriate?

Does the service and/or program meet this requirement? ☐ Yes ☒ No

Please explain: FOR SAM: SAM is a Negotiated Rate Adult Residential Facility providing services to six medically fragile consumers with severe mental and/or physical disabilities. Currently, five of the six consumers are wheelchair bound and one ambulatory consumer with obese condition. The ambulatory consumer has expressed her desire to explore other living arrangements which will allow her to have the least restrictive environment. The Regional Center is aware of the consumer's desire to move out of SAM because she has accomplished her goal to lose considerable weight. The consumer, Service Coordinator, and SAM are discussing how to address the consumer's plan. Eventually, all six consumers will be wheelchair bound. Staff assist the consumers in their daily living activities and in the administration of medication and supportive equipment for breathing and feeding. With the consumers' condition, they cannot actively participate on their own in community activities and in gainful employment. Staff takes the consumers collectively in one group to picnics, church, community activities, or take each consumer on a stroll on their wheel chairs in the neighborhood. SAM has one van in service equipped to transport four-wheel chair bound, two ambulatory consumers, two staff (one driver and one Direct Support Professional (DSP)) to transport consumers to their medical/dental appointments and community events/outings. Staff has to take a second trip to transport all remaining consumers and DSPs to the picnic site or to the outing venue. This situation prevents the facility to go to longer trips outside of Valley Springs. Consumer medical/dental appointments and community outings have to be carefully scheduled to compensate for the restriction in the availability of transportation. In case of emergency such as fire storm, earthquake, and flooding, not all consumers can be evacuated in a single trip because of wheelchair capacity restriction. In addition, all supportive equipment such as oxygen machines have to go with the consumers along with medicines, supplies, and DSP. Another van that can accommodate at least four wheelchair bound consumers is necessary to evacuate all consumers in a two-van convoy to the evacuation site. The evacuation site is predicated on the nature and location of the source of emergency as determined by governmental officials, law enforcement, fire and emergency first responders.

FOR SCM: All four consumers attend Day Programs. Each consumer can avail the Dial-A-Ride service to attend community events on their own and their respective Day Program. For community outings, medical and dental appointment and trips to the hospital, SCM has one 13-year old van that can transport one wheelchair bound consumer and three other consumers and two staff (one driver). However, the van is getting worn out especially the wheelchair lift. That van has a lot of mileage as it was purchased second hand. SCM needs a new van that can accommodate four wheelchair bound consumers and their supportive staff and supplies. The new van will allow SCM to expand its service to the consumers in terms of expanded community outings and longer trips without fear of having problems along the way. SCM will have the means of taking the consumers to Disneyland, San Diego Zoo, and other distant places of interest. The consumers have expressed their desire visit these places.

Federal Requirement #2:

The setting is selected by the individual from among setting options, including non-disability-specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.

Guidance:

- Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals?
- Does each individuals' IPP document the different setting options that were considered prior to selecting this setting?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: FOR SAM AND SCM: Each of the six consumers at SAM and four at SCM has Individual Program Plan developed collectively by the consumer, Regional Center (VMRC), the parents or conservator, Facility Administrator, Day Program and whomever the consumer wants to include in the development of the IPP. There are four private rooms at SAM and one big room shared by two consumers per their preference. Two consumers in SCM occupies private rooms and two share a bedroom.

Federal Requirement #3:

Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint

Guidance:

- Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint?
- Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality?
- Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology, Braille, large font print, sign language, participants' language, etc.)?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: DDAC's Policies and Procedures and Program Design stipulate that consumers' right of privacy, dignity, and freedom from coercion and restraint are accorded and adhered to at all times. Compliance with these Policies and Procedures are constantly monitored and enforced by House Managers, Facility Administrators, and the staff themselves. Deviations from these Policies and Procedures are addressed immediately and appropriately. Staff uses alternative methods of communication with consumers who cannot verbally communicate. Staff's familiarity with the consumers enhances effective communication.

Federal Requirement #4:

Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.

Guidance:

- Does the provider offer daily activities that are based on the individuals' needs and preferences?
- Does the provider structure their support so that the individual is able to interact with individuals they choose to interact with, both at home and in community settings?
- Does the provider structure their support so that the individual is able to participate in activities that interest them and correspond with their IPP goals?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: Staff strictly adheres to these requirements as described in DDAC's Program Design for SAM and SCM. Consumers are not restricted to whom they want to associate or interact with are given wide degree of independence in choosing activities that interest them. SAM consults with a Social Recreational Therapist to develop appropriate activities based on the consumer's interest and functional capability.

Federal Requirement #5:

Facilitates individual choice regarding services and supports, and who provides them.

Guidance:

- Does the provider support individuals in choosing which staff provide their care to the extent that alternative staff are available?
- Do individuals have opportunities to modify their services and/or voice their concerns outside of the scheduled review of services?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: At SAM, each consumer has a designated staff to provide the services the consumer needs. This is necessary to insure the medically fragile consumer receives the care he/she needs. All staff are trained and capable of providing services to the consumers' needs unless the consumer makes a request that a specific staff provides the services. SAM will accommodate this request. At SCM, the consumer receives the same services as in SAM provided by the staff assigned for the shift.

Only providers of services in **provider-owned or controlled residential settings** need to complete the remainder of this evaluation. In **provider-owned or controlled residential settings**, in addition to the above requirements, the following requirements must also be met:

Federal Requirement #6:

The unit or dwelling is a specific physical place that can be owned, rented or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city or other designated entity. For settings in which landlord/tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each participant and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.

Guidance:

- As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement?
- Are individuals informed about how to relocate and request new housing?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: The admission agreement between the consumer and the facility defines the rights and responsibilities of both parties in terms of residency. The consumer provides the facility 15 days notice or earlier if he/she wants to move out of the facility. The facility provides a minimum of 30 days notice to the consumer to move out of the facility. Actions on termination of residency are coordinated with the Regional Center Service Coordinator assigned to the consumer.

Federal Requirement #7:

Each individual has privacy in his/her sleeping or living unit:

- 1 *Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.*
- 2 *Individuals sharing units have a choice of roommates in that setting.*

Guidance:

- Do individuals have a choice regarding roommates or private accommodations?
- Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner

- 3 | *Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.*
- that is based on their preferences?
- Do individuals have the ability to lock their bedroom doors when they choose?

.Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: At SAM and SCM, each consumer is accorded privacy, security, and the freedom to decorate their sleeping or living units. The consumer can lock their doors but the staff has keys to the rooms for safety reasons. Staff knocks on the doors to announce entry into the room. Four consumers at SAM have private rooms and two share one bedroom per their choice. Two consumers at SCM have private rooms and two share one bedroom also per their choice.

Federal Requirement #8:

Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.

Guidance:

- Do individuals have access to food at any time?
- Does the home allow individuals to set their own daily schedules?
- Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: At SAM, being a Negotiated Rate on a 24/7 operation, the consumers have access to food at all times. As consumers are medically fragile, the food is provided by the staff assigned to the consumer in accordance with their prescribed nutrition instructions. At SAM and SCM, there are scheduled meal times and quiet hours at night. Consumers can make advance arrangements with staff if meals will be taken outside of the scheduled hours. Food is available to the consumers at any time and they are free and capable to help themselves. Kitchen, dining area, laundry and common areas with adequate seating and entertainment are available to the consumers.

Federal Requirement #9:

Individuals are able to have visitors of their choosing at any time.

Guidance:

- Are visitors welcome to visit the home at any time?
- Can individuals go with visitors outside the home; such as for a meal or shopping, or for a longer visit outside the home, such as for holidays or weekends?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: There are designated visiting hours at SAM and SCM. However, SAM and SCM will accommodate visitors and family members to visit the consumer outside of the visiting hours as long as the visit is properly coordinated with the facility and that other consumer's privacy is not affected. With proper coordination with the facility staff, the consumers are free to go with visitors outside the home, even on weekends and holiday.

Federal Requirement #10:

The setting is physically accessible to the individual.

Guidance:

- Do individuals have the freedom to move about inside and outside the home or are they primarily restricted to one room or area?
- Are grab bars, seats in bathrooms, ramps for wheelchairs, etc., available so that individuals who need those supports can move

- about the setting as they choose?
- Are appliances and furniture accessible to every individual?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: Consumers both in SAM and SCM are free to move around inside and outside of the facility. However, consumers that are deemed by their Primary Care Physician not capable of being outside of the facility without assistance must be supervised by a staff. Appliances, furniture, and handicap provisions such as grab bars and ramps are available and compliant with both federal and State handicap accessibility standards in both facilities. Consumers on wheelchairs must be accompanied by staff or under the supervision of the transporter or Day Program staff when outside the facilities.

CONTACT INFORMATION

Contact Name:	Doris Woodruff
Contact Phone Number:	209-483-8725
Email Address:	ddadidos@gmail.com

ACKNOWLEDGEMENT

By checking the box below, I acknowledge that completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules.

☒ I AGREE

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

Existing regional center vendors may receive funding to make changes to service settings and/or programs to help them come into compliance with the HCBS rules. To be considered for funding, vendors must complete and submit this form and the provider compliance evaluation form as one packet to the regional center with which it has primary vendorization.

Instructions:

- The concept form on the next page must be used, may not exceed four pages plus the budget worksheet and any cost back up, and must be kept in Arial 12-point font. Submit the form in Microsoft Word or PDF format. An extra half page is permitted to answer questions about prior funding, but the rest of the concept must be within the standard page requirements.
- There has been a significant change in the form and process compared to prior years. **In order to receive funding, this 2019-20 form must be used.**
- For providers that operate programs with several vendor numbers involved in one

concept, one evaluation and concept form should be submitted and should list all vendor numbers for related/included programs. If multiple programs owned by the same parent company have different compliance evaluations or concepts, additional applications can be submitted but should be attached in the same document as the other owned programs so they can be reviewed together.

- The results of the evaluation should be clearly laid out in the section referring to identification of federal requirements that are currently out of compliance, which the concept will address.
- The concept form includes detailed information that describes the funding requests and supports how the requests will assist the provider to come into compliance.
- There should be a clear link between what is being requested and the federal requirement currently out of compliance.
- Concepts should demonstrate how the requested change in service delivery will impact individuals in offering more choices or opportunities in the community.

Strengths of previously funded concepts:

- Identified the need as well as proposed a plan to provide outreach and information regarding the HCBS rules to individuals served and members of their support teams.
- Discussed the need for additional funds in order to effectively support individuals served on a more individualized basis in overcoming barriers to community integration and employment, as appropriate.
- Prioritized the preferences of individuals served and utilized their feedback in the development of the concept.
- Implemented train-the-trainer certification for person-centered planning/thinking and training regarding the HCBS rules.
- Enabled residents to age in place and exercise more choice and independence.

More information on the HCBS rules and this form can be found at www.dds.ca.gov/HCBS.

Vendor name	DDAC Co LLC dba Saint Andrews Manor (SAM) and Saint Charles Manor (SCM)
Vendor number(s)	HV0379 (SAM); HV0216 (SCM)
Primary regional center	Valley Mountain Regional Center
Service type(s)	Adult Residential Facility
Service code(s)	SAM – 113; SCM- 915
Number of consumers currently served	Six for SAM and Four for SCM
Current staff to consumer ratio	SAM and SCM follow Regional Center's required staffing schedule
1. Please provide a brief description of the service/setting that includes what a typical day consists of and how services are currently provided. This response must include the baseline/current levels for any aspects of the program for which the concept proposes funding.	
<p>FOR SAM: SAM is a Negotiated rate facility at 24/7 operation serving six consumers with severe developmental and physical disabilities and are classified as medically fragile. Five out of the six consumers are wheelchair bound. The sixth consumer is obese but can move around and walk on her own. The staff provide meals and snacks and assist the consumers in their medicine intake and daily living activities. Three consumers have oxygen machines supporting their breathing. One consumer is fed through a tube. All consumers attend part-time or full time Day Programs. The consumers are provided transportation to Day Programs by a private contractor under contract with the Regional Center. SAM is using one van that can accommodate three consumers on wheelchairs. Staff uses this van to transport consumers to their</p>	

medical/dental appointments, to community outings, and typical grocery store/pharmacy errands. A second trip is necessary to transport the rest of the consumers to the community outing venue.

FOR SCM: Services and daily activities are similar to SAM except the four consumers have moderate to significant medical conditions.

Project Narrative Description:

2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.

FOR SAM: Due to lack of capacity to transport all six wheel-chair bound consumers and supporting staff (with their medical equipment and supplies) to community outings and in times of emergencies such as fires, floods, earthquakes, and anticipated prolonged power outages, will require two trips to the community or evacuation sites. It is improbable to have a second trip to pick up remaining consumers and staff from the facility under emergency conditions, especially if the roads are impassable and evacuation sites are far from the facility. SAM is requesting funding to purchase another van to accommodate three wheel-chair bound consumers. All consumers and staff can travel by convoy to community outings and evacuation sites. All consumers can travel in one trip to community outings outside of Valley Springs, either by pleasure or for emergency reasons.

FOR SCM: SCM is currently using a van that can accommodate one-wheel chair bound consumer. This van is on the end of its useful life as maintenance is frequent and expensive especially the wheel chair lift. The van might not be able to travel long distances to emergency evacuation sites. SCM plans to expand its services to the consumers by taking them to places of their interest such as Disneyland and San Diego zoo. SCM also uses a car to transport consumers to their medical/dental appointments and for typical everyday errands. However, this car cannot accommodate any wheel-chair bound consumers. SCM is requesting funding to purchase a van that can accommodate four wheel-chair bound consumers.

FOR SAM AND SCM

Emergency Generators: Each facility needs at least 6 KW emergency generator to provide electrical power to medical equipment, emergency lighting, and refrigeration. It is preferred to purchase propane fueled generators as it is safer to store additional propane tanks.

Training: Seventeen staff need to be trained to fully understand and implement the concept of Person-Centered approach in providing services to consumers. The training will be carefully scheduled in order not to severely impact the operations at both SAM and SCM. Training will be scheduled after funding approval or as scheduled by the Regional Training Center.

3. Identify which HCBS federal requirements this concept addresses that are currently out of compliance. Could be all or a subset of those identified as out of compliance on the evaluation.

1_ ☒ _ 2_ ☐ _ 3_ ☐ _ 4_ ☐ _ 5_ ☐ _ 6_ ☐ _ 7_ ☐ _ 8_ ☐ _ 9_ ☐ _ 10_ ☐ _

4. For each HCBS out-of-compliance federal requirement that is being addressed by this concept, describe the barriers to compliance and why this concept is necessary. If this information is in the evaluation section, please copy it here.

Barriers to compliance for SAM: Without adequate means of transportation to wheelchair bound consumers (six consumers at SAM are wheelchair bound), the facility cannot transport the consumers in one trip in case of major emergencies such as fires, flooding, earthquake, and prolonged power outages. SAM is located in Valley Springs, a remote small town in Calaveras County. Prolonged power outages are becoming frequent due to fear of firestorms caused by live electrical lines.

For SCM: If the current aging van fails to operate, the consumers cannot be transported to their community outings, medical/dental appointments and evacuation sites in case of major emergencies such as fires, flooding, earthquake, and prolonged power outages. SCM's desired expansion of services such as taking consumers to places of interest will not materialize.

For SAM and SCM: In case of power outage and without the emergency generator, the

electrically powered medical equipment used by consumers will not operate. SAM consumers need their oxygen equipment to support their breathing. There are medicines that need refrigeration. Refrigerated food will get spoiled and un consumable. If staff is not properly trained, the Person-Centered Program will not be fully or effectively implemented.

5. For each out-of-compliance federal requirement that is addressed in this concept, please explain how the concept will bring the vendor into compliance.

SAM and SCM will be able to transport the consumers to their medical/dental appointments and in one trip, to designated evacuation centers in case of major emergencies and disasters. With a second van for SAM, the consumers don't have to be grouped together to attend one community event, even if a consumer is not interested in the event. For the emergency generators, the oxygen machines will continue to operate during power outages. Refrigerators will continue to operate to preserve medication and food stuff needing refrigeration. A replacement van for SCM will insure continuity of service to consumers. The van will also enable SCM to expand its service to bring consumers to their places of interest. Adequate training for staff will insure full understanding and implementation of Person-Centered Program and its concept.

6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?

Outcome will be availability of more reliable means of transportation. Objective is to continue the services to the consumers during normal and emergency conditions. For emergency generators, the consumers can continue to use the oxygen machines they need to survive and preserve food for their consumption. Adequate training for Person Centered Program will facilitate full understanding and implementation of the concept with other facility staff, for the full benefit of the consumers.

7. Please describe how and/or what was done to include input from the individuals served in developing this concept? Discuss not only the development of the concept, but also what steps were taken to identify the interests and desires of the individuals and who was involved in that process.

At SAM, all consumers are under total care. Due to their severe mental and or physical condition, it is not practical or possible to ask the consumers any input on the development of the concept. The staff were consulted on how to prepare the consumers for the evacuation. Staff knows what medicines and other daily living supplies the consumers need to sustain service in evacuation sites. At SCM, the consumers were consulted about the expansion of services in which they have expressed during the monthly residential council meetings their desire to visit places of interest. They were also consulted on which supplies they would like to bring with them during evacuation. Staff knows which medicines and other daily living supplies the consumers need during their stay at the evacuation site.

8. Please describe how the concept you propose will enable you to provide more person-centered services to your clients.

Concept will insure the continuity of support and services to consumers, during normal times and times of emergency, with the Person-Centered concept in services at full implementation. Having adequate transportation at SAM and SCM, consumers will have the flexibility of choosing which places of interest they want to visit.

9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2019-20 HCBS Funding.

The requested vehicles and emergency generators each for SAM and SCM will be maintained just like any other vehicle and capital equipment. Benefits to the consumers will be the availability of services at all times, especially during major disasters.

10. Write a brief narrative below explaining each major cost category and timeline. Complete the budget template at the end of the concept sheet. An excel version with

formulas is available. When applicable, budgets should include personnel/benefits, operating costs such as consultants or training, administrative expenses/indirect costs, and capital costs (assets lasting more than 2 years). If project spans 2 years or occurs in phases, budget should be separated by phase/year.

Administrative costs, if any, must comply with DDS' vendor requirements, including a cap of 15% of the sum of personnel/benefits, consulting, and operating costs (must exclude capital costs).

http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=4629.7&lawCode=WIC

The expense will be the purchase of the vehicles and emergency generators which will last for at least more than 10 years. Maintenance and fuel costs will be covered as normal operating expenses. Training of staff will be a one-time expense.

11. Please address sustainability of funding sources for all programs or concepts requiring any funding past the time frame of the requested grant, especially those that involve staff or other long-term costs. Please mark "not applicable" if costs will all be incurred during the program time frame.

Operation and maintenance of vehicles and emergency power generators will be funded by the facility as normal or regular operating expenses.

12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?	HCBS Funding	___ No ___ Yes.	If Yes,
	FY(s) _____		
	Disparity Funding	___ No ___ Yes.	If Yes,
	FY(s) _____		
	CPP Funding	___ No ___x_ Yes.	If Yes FY(s)
	2012 _____		
If yes to any question be sure to answer questions 13 and 14.			

For providers who have received prior HCBS, Disparity or CPP Funding from DDS

13. If your organization has received prior funding from any of the above sources, please provide an update on the prior funding project. You may copy and paste from progress update(s) previously provided to regional centers or DDS.

The CPP funding for SAM was to develop and establish a Negotiated Rate Adult Residential Facility at Valley Springs. Funding for this was spent and closed in 2012. SAM has been in operation since 2012.

14. If your organization received prior funding, please explain how the current funding request is not redundant with any prior funding received and/or builds on the prior funding but was not part of the original funding.

Current funding request is to procure transport vehicles, emergency generators, and training funding. Previous funding was to develop and establish a new Negotiated Rate ARF at Valley Springs. There is no redundancy in funding.

Reavis Woodruff
11/22/19

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Vendor Number: HV0379 (SAM); HV0216 (SCM)			
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Federal Requirement #1: <i>The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.</i>		Guidance: <ul style="list-style-type: none">• Do individuals receive services in the community based on their needs, preferences and abilities?• Does the individual participate in outings and activities in the community as part of his or her plan for services?• If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource?• Do individuals have the option to	

control their personal resources, as appropriate?

Does the service and/or program meet this requirement? ☐ Yes ☒ No

Please explain: **FOR SAM:** SAM is a Negotiated Rate Adult Residential Facility providing services to six medically fragile consumers with severe mental and/or physical disabilities. Currently, five of the six consumers are wheelchair bound and one ambulatory consumer with obese condition. The ambulatory consumer has expressed her desire to explore other living arrangements which will allow her to have the least restrictive environment. The Regional Center is aware of the consumer's desire to move out of SAM because she has accomplished her goal to lose considerable weight. The consumer, Service Coordinator, and SAM are discussing how to address the consumer's plan. Eventually, all six consumers will be wheelchair bound. Staff assist the consumers in their daily living activities and in the administration of medication and supportive equipment for breathing and feeding. With the consumers' condition, they cannot actively participate on their own in community activities and in gainful employment. Staff takes the consumers collectively in one group to picnics, church, community activities, or take each consumer on a stroll on their wheel chairs in the neighborhood. SAM has one van in service equipped to transport four-wheel chair bound, two ambulatory consumers, two staff (one driver and one Direct Support Professional (DSP)) to transport consumers to their medical/dental appointments and community events/outings. Staff has to take a second trip to transport all remaining consumers and DSPs to the picnic site or to the outing venue. This situation prevents the facility to go to longer trips outside of Valley Springs. Consumer medical/dental appointments and community outings have to be carefully scheduled to compensate for the restriction in the availability of transportation. In case of emergency such as fire storm, earthquake, and flooding, not all consumers can be evacuated in a single trip because of wheelchair capacity restriction. In addition, all supportive equipment such as oxygen machines have to go with the consumers along with medicines, supplies, and DSP. Another van that can accommodate at least four wheelchair bound consumers is necessary to evacuate all consumers in a two-van convoy to the evacuation site. The evacuation site is predicated on the nature and location of the source of emergency as determined by governmental officials, law enforcement, fire and emergency first responders.

FOR SCM: All four consumers attend Day Programs. Each consumer can avail the Dial-A-Ride service to attend community events on their own and their respective Day Program. For community outings, medical and dental appointment and trips to the hospital, SCM has one 13-year old van that can transport one wheelchair bound consumer and three other consumers and two staff (one driver). However, the van is getting worn out especially the wheelchair lift. That van has a lot of mileage as it was purchased second hand. SCM needs a new van that can accommodate four wheelchair bound consumers and their supportive staff and supplies. The new van will allow SCM to expand its service to the consumers in terms of expanded community outings and longer trips without fear of having problems along the way. SCM will have the means of taking the consumers to Disneyland, San Diego Zoo, and other distant places of interest. The consumers have expressed their desire visit these places.

Federal Requirement #2:

The setting is selected by the individual from among setting options, including non-disability-specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.

Guidance:

- Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals?
- Does each individuals' IPP document the different setting options that were considered prior to selecting this setting?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: FOR SAM AND SCM: Each of the six consumers at SAM and four at SCM has Individual Program Plan developed collectively by the consumer, Regional Center (VMRC), the parents or conservator, Facility Administrator, Day Program and whomever the consumer wants to include in the development of the IPP. There are four private rooms at SAM and one big room shared by two consumers per their preference. Two consumers in SCM occupies private rooms and two share a bedroom.

Federal Requirement #3:

Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint

Guidance:

- Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint?
- Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality?
- Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology, Braille, large font print, sign language, participants' language, etc.)?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: DDAC's Policies and Procedures and Program Design stipulate that consumers' right of privacy, dignity, and freedom from coercion and restraint are accorded and adhered to at all times. Compliance with these Policies and Procedures are constantly monitored and enforced by House Managers, Facility Administrators, and the staff themselves. Deviations from these Policies and Procedures are addressed immediately and appropriately. Staff uses alternative methods of communication with consumers who cannot verbally communicate. Staff's familiarity with the consumers enhances effective communication.

Federal Requirement #4:

Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.

Guidance:

- Does the provider offer daily activities that are based on the individuals' needs and preferences?
- Does the provider structure their support so that the individual is able to interact with individuals they choose to interact with, both at home and in community settings?
- Does the provider structure their support so that the individual is able to participate in activities that interest them and correspond with their IPP goals?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: Staff strictly adheres to these requirements as described in DDAC's Program Design for SAM and SCM. Consumers are not restricted to whom they want to associate or interact with are given wide degree of independence in choosing activities that interest them. SAM consults with a Social Recreational Therapist to develop appropriate activities based on the consumer's interest and functional capability.

Federal Requirement #5:

Facilitates individual choice regarding services and supports, and who provides them.

Guidance:

- Does the provider support individuals in choosing which staff provide their care to the extent that alternative staff are available?
- Do individuals have opportunities to modify their services and/or voice their concerns outside of the scheduled review of services?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: At SAM, each consumer has a designated staff to provide the services the consumer needs. This is necessary to insure the medically fragile consumer receives the care he/she needs. All staff are trained and capable of providing services to the consumers' needs unless the consumer makes a request that a specific staff provides the services. SAM will accommodate this request. At SCM, the consumer receives the same services as in SAM provided by the staff assigned for the shift.

Only providers of services in **provider-owned or controlled residential settings** need to complete the remainder of this evaluation. In **provider-owned or controlled residential settings**, in addition to the above requirements, the following requirements must also be met:

Federal Requirement #6:

The unit or dwelling is a specific physical place that can be owned, rented or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city or other designated entity. For settings in which landlord/tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each participant and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.

Guidance:

- As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement?
- Are individuals informed about how to relocate and request new housing?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: The admission agreement between the consumer and the facility defines the rights and responsibilities of both parties in terms of residency. The consumer provides the facility 15 days notice or earlier if he/she wants to move out of the facility. The facility provides a minimum of 30 days notice to the consumer to move out of the facility. Actions on termination of residency are coordinated with the Regional Center Service Coordinator assigned to the consumer.

Federal Requirement #7:

Each individual has privacy in his/her sleeping or living unit:

- 1 *Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.*
- 2 *Individuals sharing units have a choice of roommates in that setting.*

Guidance:

- Do individuals have a choice regarding roommates or private accommodations?
- Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner

- 3 | *Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.*
- that is based on their preferences?
- Do individuals have the ability to lock their bedroom doors when they choose?

.Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: At SAM and SCM, each consumer is accorded privacy, security, and the freedom to decorate their sleeping or living units. The consumer can lock their doors but the staff has keys to the rooms for safety reasons. Staff knocks on the doors to announce entry into the room. Four consumers at SAM have private rooms and two share one bedroom per their choice. Two consumers at SCM have private rooms and two share one bedroom also per their choice.

Federal Requirement #8:

Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.

Guidance:

- Do individuals have access to food at any time?
- Does the home allow individuals to set their own daily schedules?
- Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: At SAM, being a Negotiated Rate on a 24/7 operation, the consumers have access to food at all times. As consumers are medically fragile, the food is provided by the staff assigned to the consumer in accordance with their prescribed nutrition instructions. At SAM and SCM, there are scheduled meal times and quiet hours at night. Consumers can make advance arrangements with staff if meals will be taken outside of the scheduled hours. Food is available to the consumers at any time and they are free and capable to help themselves. Kitchen, dining area, laundry and common areas with adequate seating and entertainment are available to the consumers.

Federal Requirement #9:

Individuals are able to have visitors of their choosing at any time.

Guidance:

- Are visitors welcome to visit the home at any time?
- Can individuals go with visitors outside the home; such as for a meal or shopping, or for a longer visit outside the home, such as for holidays or weekends?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: There are designated visiting hours at SAM and SCM. However, SAM and SCM will accommodate visitors and family members to visit the consumer outside of the visiting hours as long as the visit is properly coordinated with the facility and that other consumer's privacy is not affected. With proper coordination with the facility staff, the consumers are free to go with visitors outside the home, even on weekends and holiday.

Federal Requirement #10:

The setting is physically accessible to the individual.

Guidance:

- Do individuals have the freedom to move about inside and outside the home or are they primarily restricted to one room or area?
- Are grab bars, seats in bathrooms, ramps for wheelchairs, etc., available so that individuals who need those supports can move

- about the setting as they choose?
- Are appliances and furniture accessible to every individual?

Does the service and/or program meet this requirement? ☒ Yes ☐ No

Please explain: Consumers both in SAM and SCM are free to move around inside and outside of the facility. However, consumers that are deemed by their Primary Care Physician not capable of being outside of the facility without assistance must be supervised by a staff. Appliances, furniture, and handicap provisions such as grab bars and ramps are available and compliant with both federal and State handicap accessibility standards in both facilities. Consumers on wheelchairs must be accompanied by staff or under the supervision of the transporter or Day Program staff when outside the facilities.

CONTACT INFORMATION

Contact Name:	Doris Woodruff
Contact Phone Number:	209-483-8725
Email Address:	ddadidos@gmail.com

ACKNOWLEDGEMENT

By checking the box below, I acknowledge that completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules.

☒ I AGREE

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

Existing regional center vendors may receive funding to make changes to service settings and/or programs to help them come into compliance with the HCBS rules. To be considered for funding, vendors must complete and submit this form and the provider compliance evaluation form as one packet to the regional center with which it has primary vendorization.

Instructions:

- The concept form on the next page must be used, may not exceed four pages plus the budget worksheet and any cost back up, and must be kept in Arial 12-point font. Submit the form in Microsoft Word or PDF format. An extra half page is permitted to answer questions about prior funding, but the rest of the concept must be within the standard page requirements.
- There has been a significant change in the form and process compared to prior years. **In order to receive funding, this 2019-20 form must be used.**
- For providers that operate programs with several vendor numbers involved in one

concept, one evaluation and concept form should be submitted and should list all vendor numbers for related/included programs. If multiple programs owned by the same parent company have different compliance evaluations or concepts, additional applications can be submitted but should be attached in the same document as the other owned programs so they can be reviewed together.

- The results of the evaluation should be clearly laid out in the section referring to identification of federal requirements that are currently out of compliance, which the concept will address.
- The concept form includes detailed information that describes the funding requests and supports how the requests will assist the provider to come into compliance.
- There should be a clear link between what is being requested and the federal requirement currently out of compliance.
- Concepts should demonstrate how the requested change in service delivery will impact individuals in offering more choices or opportunities in the community.

Strengths of previously funded concepts:

- Identified the need as well as proposed a plan to provide outreach and information regarding the HCBS rules to individuals served and members of their support teams.
- Discussed the need for additional funds in order to effectively support individuals served on a more individualized basis in overcoming barriers to community integration and employment, as appropriate.
- Prioritized the preferences of individuals served and utilized their feedback in the development of the concept.
- Implemented train-the-trainer certification for person-centered planning/thinking and training regarding the HCBS rules.
- Enabled residents to age in place and exercise more choice and independence.

More information on the HCBS rules and this form can be found at www.dds.ca.gov/HCBS.

Vendor name	DDAC Co LLC dba Saint Andrews Manor (SAM) and Saint Charles Manor (SCM)
Vendor number(s)	HV0379 (SAM); HV0216 (SCM)
Primary regional center	Valley Mountain Regional Center
Service type(s)	Adult Residential Facility
Service code(s)	SAM – 113; SCM- 915
Number of consumers currently served	Six for SAM and Four for SCM
Current staff to consumer ratio	SAM and SCM follow Regional Center's required staffing schedule
1. Please provide a brief description of the service/setting that includes what a typical day consists of and how services are currently provided. This response must include the baseline/current levels for any aspects of the program for which the concept proposes funding.	
<p>FOR SAM: SAM is a Negotiated rate facility at 24/7 operation serving six consumers with severe developmental and physical disabilities and are classified as medically fragile. Five out of the six consumers are wheelchair bound. The sixth consumer is obese but can move around and walk on her own. The staff provide meals and snacks and assist the consumers in their medicine intake and daily living activities. Three consumers have oxygen machines supporting their breathing. One consumer is fed through a tube. All consumers attend part-time or full time Day Programs. The consumers are provided transportation to Day Programs by a private contractor under contract with the Regional Center. SAM is using one van that can accommodate three consumers on wheelchairs. Staff uses this van to transport consumers to their</p>	

medical/dental appointments, to community outings, and typical grocery store/pharmacy errands. A second trip is necessary to transport the rest of the consumers to the community outing venue.

FOR SCM: Services and daily activities are similar to SAM except the four consumers have moderate to significant medical conditions.

Project Narrative Description:

2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.

FOR SAM: Due to lack of capacity to transport all six wheel-chair bound consumers and supporting staff (with their medical equipment and supplies) to community outings and in times of emergencies such as fires, floods, earthquakes, and anticipated prolonged power outages, will require two trips to the community or evacuation sites. It is improbable to have a second trip to pick up remaining consumers and staff from the facility under emergency conditions, especially if the roads are impassable and evacuation sites are far from the facility. SAM is requesting funding to purchase another van to accommodate three wheel-chair bound consumers. All consumers and staff can travel by convoy to community outings and evacuation sites. All consumers can travel in one trip to community outings outside of Valley Springs, either by pleasure or for emergency reasons.

FOR SCM: SCM is currently using a van that can accommodate one-wheel chair bound consumer. This van is on the end of its useful life as maintenance is frequent and expensive especially the wheel chair lift. The van might not be able to travel long distances to emergency evacuation sites. SCM plans to expand its services to the consumers by taking them to places of their interest such as Disneyland and San Diego zoo. SCM also uses a car to transport consumers to their medical/dental appointments and for typical everyday errands. However, this car cannot accommodate any wheel-chair bound consumers. SCM is requesting funding to purchase a van that can accommodate four wheel-chair bound consumers.

FOR SAM AND SCM

Emergency Generators: Each facility needs at least 6 KW emergency generator to provide electrical power to medical equipment, emergency lighting, and refrigeration. It is preferred to purchase propane fueled generators as it is safer to store additional propane tanks.

Training: Seventeen staff need to be trained to fully understand and implement the concept of Person-Centered approach in providing services to consumers. The training will be carefully scheduled in order not to severely impact the operations at both SAM and SCM. Training will be scheduled after funding approval or as scheduled by the Regional Training Center.

3. Identify which HCBS federal requirements this concept addresses that are currently out of compliance. Could be all or a subset of those identified as out of compliance on the evaluation.

1__X__ 2__ 3__ 4__ 5__ 6__ 7__ 8__ 9__ 10__

4. For each HCBS out-of-compliance federal requirement that is being addressed by this concept, describe the barriers to compliance and why this concept is necessary. If this information is in the evaluation section, please copy it here.

Barriers to compliance for SAM: Without adequate means of transportation to wheelchair bound consumers (six consumers at SAM are wheelchair bound), the facility cannot transport the consumers in one trip in case of major emergencies such as fires, flooding, earthquake, and prolonged power outages. SAM is located in Valley Springs, a remote small town in Calaveras County. Prolonged power outages are becoming frequent due to fear of firestorms caused by live electrical lines.

For SCM: If the current aging van fails to operate, the consumers cannot be transported to their community outings, medical/dental appointments and evacuation sites in case of major emergencies such as fires, flooding, earthquake, and prolonged power outages. SCM's desired expansion of services such as taking consumers to places of interest will not materialize.

For SAM and SCM: In case of power outage and without the emergency generator, the

electrically powered medical equipment used by consumers will not operate. SAM consumers need their oxygen equipment to support their breathing. There are medicines that need refrigeration. Refrigerated food will get spoiled and un consumable. If staff is not properly trained, the Person-Centered Program will not be fully or effectively implemented.

5. For each out-of-compliance federal requirement that is addressed in this concept, please explain how the concept will bring the vendor into compliance.

SAM and SCM will be able to transport the consumers to their medical/dental appointments and in one trip, to designated evacuation centers in case of major emergencies and disasters. With a second van for SAM, the consumers don't have to be grouped together to attend one community event, even if a consumer is not interested in the event. For the emergency generators, the oxygen machines will continue to operate during power outages. Refrigerators will continue to operate to preserve medication and food stuff needing refrigeration. A replacement van for SCM will insure continuity of service to consumers. The van will also enable SCM to expand its service to bring consumers to their places of interest. Adequate training for staff will insure full understanding and implementation of Person-Centered Program and its concept.

6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?

Outcome will be availability of more reliable means of transportation. Objective is to continue the services to the consumers during normal and emergency conditions. For emergency generators, the consumers can continue to use the oxygen machines they need to survive and preserve food for their consumption. Adequate training for Person Centered Program will facilitate full understanding and implementation of the concept with other facility staff, for the full benefit of the consumers.

7. Please describe how and/or what was done to include input from the individuals served in developing this concept? Discuss not only the development of the concept, but also what steps were taken to identify the interests and desires of the individuals and who was involved in that process.

At SAM, all consumers are under total care. Due to their severe mental and or physical condition, it is not practical or possible to ask the consumers any input on the development of the concept. The staff were consulted on how to prepare the consumers for the evacuation. Staff knows what medicines and other daily living supplies the consumers need to sustain service in evacuation sites. At SCM, the consumers were consulted about the expansion of services in which they have expressed during the monthly residential council meetings their desire to visit places of interest. They were also consulted on which supplies they would like to bring with them during evacuation. Staff knows which medicines and other daily living supplies the consumers need during their stay at the evacuation site.

8. Please describe how the concept you propose will enable you to provide more person-centered services to your clients.

Concept will insure the continuity of support and services to consumers, during normal times and times of emergency, with the Person-Centered concept in services at full implementation. Having adequate transportation at SAM and SCM, consumers will have the flexibility of choosing which places of interest they want to visit.

9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2019-20 HCBS Funding.

The requested vehicles and emergency generators each for SAM and SCM will be maintained just like any other vehicle and capital equipment. Benefits to the consumers will be the availability of services at all times, especially during major disasters.

10. Write a brief narrative below explaining each major cost category and timeline. Complete the budget template at the end of the concept sheet. An excel version with

formulas is available. When applicable, budgets should include personnel/benefits, operating costs such as consultants or training, administrative expenses/indirect costs, and capital costs (assets lasting more than 2 years). If project spans 2 years or occurs in phases, budget should be separated by phase/year.

Administrative costs, if any, must comply with DDS' vendor requirements, including a cap of 15% of the sum of personnel/benefits, consulting, and operating costs (must exclude capital costs).

http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=4629.7&lawCode=WIC

The expense will be the purchase of the vehicles and emergency generators which will last for at least more than 10 years. Maintenance and fuel costs will be covered as normal operating expenses. Training of staff will be a one-time expense.

11. Please address sustainability of funding sources for all programs or concepts requiring any funding past the time frame of the requested grant, especially those that involve staff or other long-term costs. Please mark "not applicable" if costs will all be incurred during the program time frame.

Operation and maintenance of vehicles and emergency power generators will be funded by the facility as normal or regular operating expenses.

12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?	HCBS Funding	___ No ___ Yes.	If Yes,
	FY(s) _____		
	Disparity Funding	___ No ___ Yes.	If Yes,
	FY(s) _____		
	CPP Funding	___ No ___x_ Yes.	If Yes FY(s)
	2012 _____		
If yes to any question be sure to answer questions 13 and 14.			

For providers who have received prior HCBS, Disparity or CPP Funding from DDS

13. If your organization has received prior funding from any of the above sources, please provide an update on the prior funding project. You may copy and paste from progress update(s) previously provided to regional centers or DDS.

The CPP funding for SAM was to develop and establish a Negotiated Rate Adult Residential Facility at Valley Springs. Funding for this was spent and closed in 2012. SAM has been in operation since 2012.

14. If your organization received prior funding, please explain how the current funding request is not redundant with any prior funding received and/or builds on the prior funding but was not part of the original funding.

Current funding request is to procure transport vehicles, emergency generators, and training funding. Previous funding was to develop and establish a new Negotiated Rate ARF at Valley Springs. There is no redundancy in funding.

Reavis Woodruff
11/22/19

Home and Community-Based Services (HCBS) Rules
CONCEPT FORM

HCBS CONCEPT BUDGET						
Vendor Name		DDAC Co LLC dba Saint Andrews Manor (SAM) and Saint Charles Manor (SCM)				
Vendor Number(s)		IIV0379 - 113 (SAM); IIV0216 - 915 (SCM)				
	Salary and Benefits	Year 1 Budget		Year 2 Budget		Total
		FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (salary + benefits)						
Position Description			0		0	0
Position Description			0		0	0
Position Description			0		0	0
Position Description			0		0	0
Position Description			0		0	0
Position Description			0		0	0
Position Description			0		0	0
Position Description			0		0	0
Position Description			0		0	0
Personnel Subtotal			0		0	0
Operating expenses						
						0
						0
						0
						0
						0
						0
						0
						0
						0
Operating Subtotal			0		0	0
Administrative Expenses						
						0
						0
						0
						0
						0
						0
						0
Administrative Subtotal			0		0	0
Capital expenses						
Four Wheelchair Bound Consumer Van with Lift for SAM			61,424			61,424
Expand SAM driveway for van			6,000			6,000
Four WC Van for SCM			53,725			53,725
6 KW Emergency Generator for SAM			3,718			3,718
6 KW Emergency Generator for SCM			3,718			3,718
Training for 17 staff			6,651			6,651
Insurance for 2 vans for two years			4,000			4,000
						0
						0
Capital Subtotal			139,236		0	139,236
Total Concept Cost			139,236		0	139,236

See Attachment F for budget details and restrictions

Reverie Woodruff
11/22/19

Cost of Training Staff on Person Centered Program per HCBS

Registration Cost = \$90 per trainee x 17 trainees = \$1,530

Mileage and meals:

Valley Springs:

14 staff x 33.5 miles/trip x 4 trips/staff x \$.058/mile = \$1,088

14 staff x \$15/day meal allowance x 2 days = \$420

Modesto:

3 staff x 31.3 miles/trip x 4 trips x \$0.58/mile = \$218

3 staff x \$15/day meal allowance x 2 days = \$90

Staff hours:

\$12.15/hour average labor rate x 16 hours (2- 8 hour work day)

x 17 staff = \$3,305

**Total cost for training = \$1,530 + \$1,088 + \$420 + \$218 + \$90 +
\$3,305 = \$6,651**

Dennis Woodruff
11/22/19